# Utilization Management(UM)

State Plan Benefits

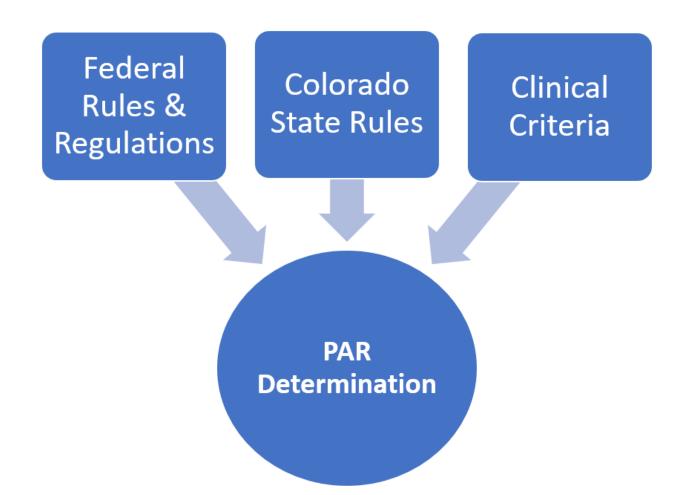
Presented by: Alexis Keller



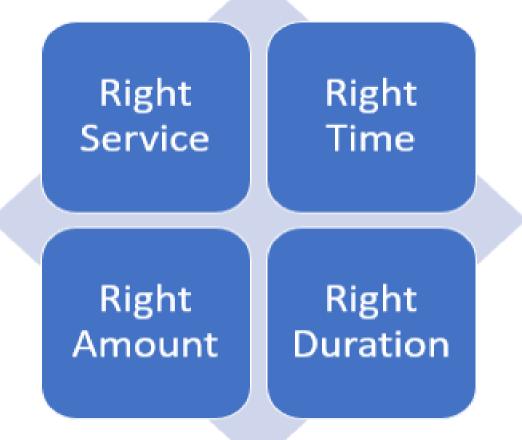
## Agenda

- Overview of UM and Prior Authorizations
- The UM Vendor
- Services Requiring Prior Authorization
- The PAR Process
- Member and Provider Resources

#### What is a PAR?



## Why do we PAR?



## Kepro

- Served 27 state Medicaid agencies for 20+ Years
- Quality Improvement Organization (QIO), Utilization Review Accreditation Commission (URAC) accredited, and licensed to perform reviews in every state.

#### What do we PAR?

- Diagnostic Imaging
- Durable Medical Equipment
- EPSDT Exceptions
- Molecular Testing
- Select Surgical Procedures including Transplants, Gender Confirmation, Bariatric, etc.
- Pediatric Behavioral Therapy
- Pediatric Personal Care Services

- Outpatient Physical, Occupational, and Speech Therapy
- Pediatric Long Term Home Health (PLTHH)
- Private Duty Nursing (PDN)
- Audiology
- Synagis (seasonal)
- Inpatient Hospital Review Program (IHRP)
- Out of State Inpatient Stays

#### The General PAR Process

Provider determines with Member that a service/benefit is needed and that PAR is required



Gathers all documentation, orders and tools and submits authorization via PAR portal



UM Vendor reviews for completeness. If incomplete requests add'l doc and returns to Provider



Once Provider returns auth with all necessary documentation, UM Vendor reviews for compliance & medical necessity



If denied, Providers can view denial letter in PAR portal, and members are sent denial letter with clinical rationale if denied for MN.



Approval or denial is sent to the claims management system, interchange, nightly.



If compliant & medically necessary approves request. If auth isn't compliant and/or medically necessary (in part or whole) that portion of auth is denied.

## Member Appeals

- Upon a PAR determination being issued, a member has the right to file an appeal for any adverse determination (technical and medical necessity, full or partial denial).
- Member's appeal rights and directions are included in the PAR adverse determination letters mailed to members.

#### Member and Provider Resources

#### Members

- Your Provider
- Member Contact Center: 1-800-221-3943

#### **Providers**

- The UM Issue Inbox: Hcpf\_UM@state.co.us
- Kepro customer service: (720) 689-6340





## Thank you!